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# DMC-ODS Contractor Meeting

## January 14, 2026



# Agenda

- Welcome and Introductions
- Presentation/Discussion – SLE/Recovery Residence Beds
- Provider Updates/Announcements
- Discussion – Care Coordination
- County Updates/Announcements

# **SLE/Recovery Residence Beds**

**Today's Presenters**  
***Buckelew Programs***  
***Center Point, Inc.***

**Other Contracted SLEs**  
***Cornerstone***  
***Marin Services for Men***  
***Summit Sober Living***



# SLE/Recovery Residence Beds

## Buckelew and Center Point Overview

- Overview of SLE/RR Sites and Contracted Capacity
- Populations Served
- Referral and Admission Process
  - Contact Information
  - Referral Forms
  - Criteria for Admission, Re-Admission and Exclusion from Admission
  - Criteria and Process for Discharge
  - Projected Timelines for Admission Decisions and Admission to the SLE/RR
  - Strategies to Ensure Equitable Approach to Admissions

## Additional Discussion Item: Female SLE Beds





# Center Point, Inc.

Recovery Residences



# What Are Recovery Residences?

Behavioral Health Information Notice No.:  
21-012 Page 2 March 12, 2021

**DEFINITION:** For the purposes of HSC Section 11833.05, “recovery residence” means a residential dwelling that provides primary housing for individuals who seek a cooperative living arrangement that supports personal recovery from a substance use disorder and that does not require licensure by the department nor provides licensable services, pursuant to Chapter 7.5 (commencing with HSC Section 11834.01). A recovery residence may include, but is not limited to, residential dwellings commonly referred to as “sober living homes,” “sober living environments,” or “unlicensed alcohol and drug-free residences.”



# Center Point Model

Center Point considers its Recovery Residences part of its treatment continuum, as individuals who have completed residential treatment or are enrolled in outpatient treatment services often require a sober living environment that is peer-driven to enhance and reinforce their recovery efforts. To maintain residency, we require residents to:

- Maintain abstinence.
- Pay housing fees on time.
- Acquire self-sufficiency (employment, school, income enhancement).
- Participate in viable relapse prevention strategies (outpatient, self-help).
- Maintain physical and mental health needs.
- Adapt to communal living standards.
- Work towards acquiring independent housing.



# Eligibility Criteria

- Current Center Point clients are given priority as part of discharge planning.
- Referrals from CBOs accepted.
- Must have the ability to self-care and have adequate adult living skills.
- Must be able to pay residency fees.
- Must be drug-free and test negative on a rapid drug screen at the time of admission.
- Must have a viable recovery and relapse prevention strategy.
- Must be willing to follow CPI Recovery Residences Rules.





# Details

- Length of stay varies based on the ability to pay residence fees.
- Maximum length of stay is 24 months.
- Average length of stay is 12 months.
- Subsidies for residence fees may be available.
- Support services are available.
- Case management services provided.
- Meals and transportation are not provided.





# Facilities

## Women/Children: 19 Beds

- Mary Street 8 Beds + Children
- Belle Avenue 11 Beds

## Men: 53 Beds

- 134 Picnic 8 Beds
- 138 Picnic 8 Beds (Justice-Involved)
- 812 D Street 12 Beds
- 814 D Street 12 Beds
- Tam House 5 Beds
- 207 D Street 8 Beds (DSC Housing)



# Residency Costs

## Move-In Costs

1st Month	<b>\$850.00</b>
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Security Deposit	<b>\$350.00</b>
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Administration Fee	<b>\$150.00</b>
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<b>Total Move-In Cost</b>	<b>\$1,350</b>
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## Monthly Costs

Monthly Fee	<b>\$850.00</b>
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Late Fee	<b>\$50.00</b>
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**Note:** Subsidies for residence fees may be available. Contact us to learn more about financial assistance options.



# Contact Information

## Multi-Services Center

<b>ADDRESS:</b>	<b>1601 2nd Street, Suite 104. San Rafael, CA</b>
<b>PRIMARY CONTACT:</b>	<b>Ryan Harder</b>
<b>PHONE:</b>	<b>(415) 456-6655, Ext. 403</b>
<b>EMAIL:</b>	<b><u><a href="mailto:rharder@cpinc.org">rharder@cpinc.org</a></u></b>

# Provider Updates

- Ritter Center Behavioral Health Community Fair
- Other Provider Updates



## Behavioral Health Community Fair

Friday January 23<sup>rd</sup>, 2026 | 11am - 2pm

San Rafael Community Center | 618 B Street, San Rafael

*Hosted by Ritter Center's Behavioral Health Department*

### **RITTER CENTER BEHAVIORAL HEALTH**

Meet our counselors, therapists, psychiatric nurse practitioners, and support staff. Learn about available programs, complete screenings, and schedule assessments on-site.

### **MEDI-CAL & CARE COORDINATION**

Get help applying for Medi-Cal or updating your coverage, with care coordinators available for on-site assistance.

### **COMMUNITY RESOURCES**

Connect with local organizations offering a wide range of resources to help you thrive.

### **SOMETHING FOR EVERYONE**

Free food, raffle prizes, clothing, haircuts, and so much more!

**Open to anyone looking for connection, support, resources or a warm meal**

# Updates and Announcements

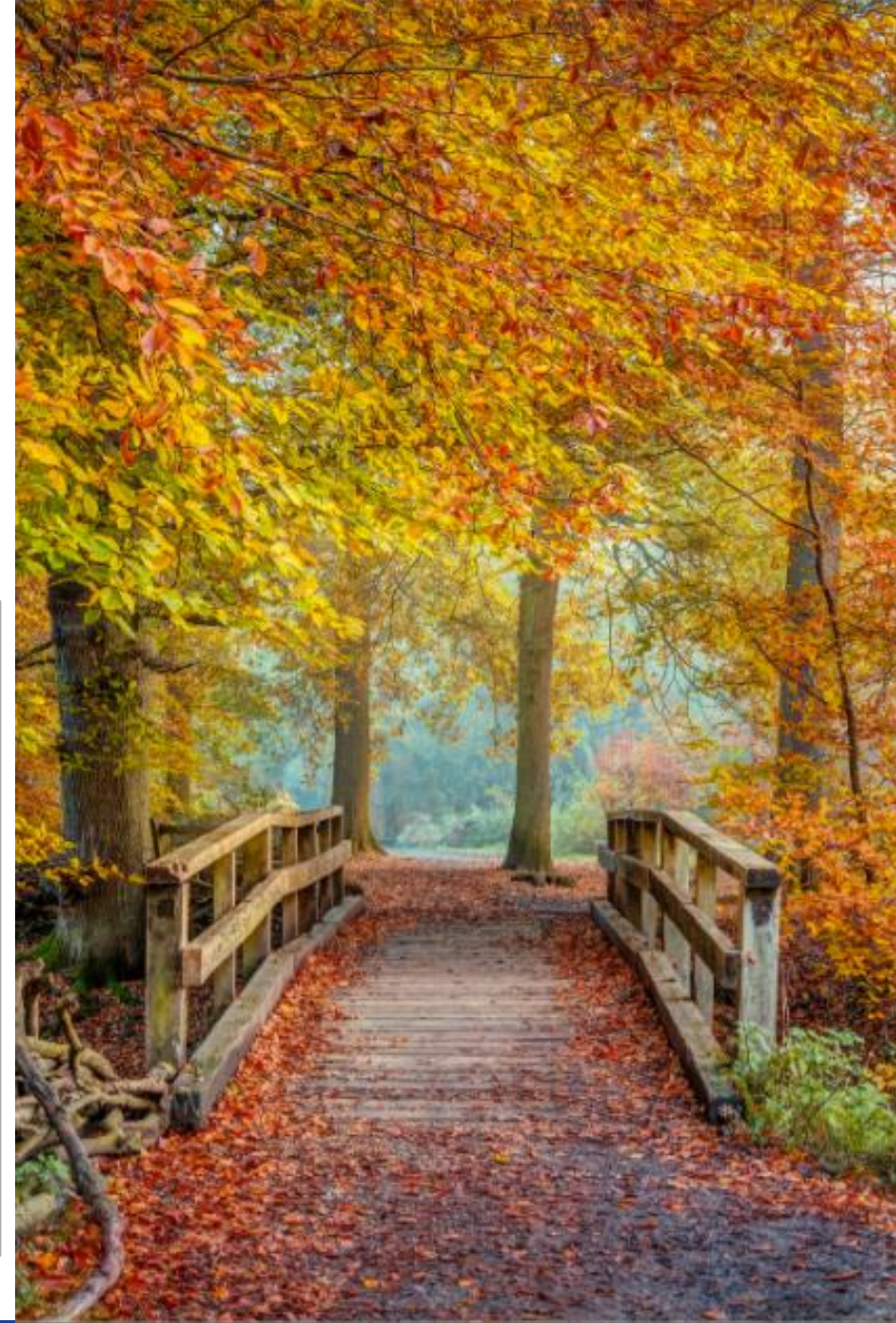
- **Site Visit Reminders and Resources**
  - Narcan Expiration Dates
  - Posting of Member Handbook Notice of Significant Changes
  - Fire extinguisher inspections/dates
  - Staff Verification Spreadsheet
- **SB 43 Live effective 1/1/26**
  - Visit BHRS [SB 43 website](#) for information



# Updates and Announcements

- **New Custom Report in SmartCare**
  - Service Activity & Client Demographics
    - Select the Date of Service date range, and the report will display all services alongside client demographics and current primary Insurance type (Medicare, Medi-Cal, Uninsured, etc)

Marin - Service Activity & Client Demographic											
Program	Client Id Name	DOB	Insurance Type	Address	Race	Ethnicity	Language	Sexual Orientation	Housing Status	DateOfService	Service Status
Bucklew WM										1/8/2026 12:00:00 AM	Complete
Bucklew WM										1/8/2026 4:00:00 PM	Complete
Bucklew WM										1/9/2026 12:00:00 AM	Complete
Bucklew WM										1/9/2026 8:00:00 AM	Complete
Bucklew WM										1/9/2026 9:15:00 AM	Complete
Bucklew WM										1/10/2026 12:00:00 PM	Complete
Bucklew WM										1/10/2026 6:00:00 PM	Complete



# Updates and Announcements



## Navigating Medi-Cal Changes:

Link: [BenefitsCal.com](https://www.BenefitsCal.com)

- New Medi-Cal changes require more frequent re-certifications
- Clients without mailing addresses face challenges receiving notices
- BenefitsCal.com offers a secure online option for updates and messages
- Providers can help clients stay informed and reduce stress



# Updates and Announcements

## DHCS BH Information Notices

- BHIN 25-042: BHP Member Handbook
  - Reminder: Updated Handbook will be ready by 2/1/26

## DHCS FAQs

- Updated: 2026 CalOMSTxDATAR FAQ
- AB 2473 – SUD Counselor Education Requirements

## RFP Updates

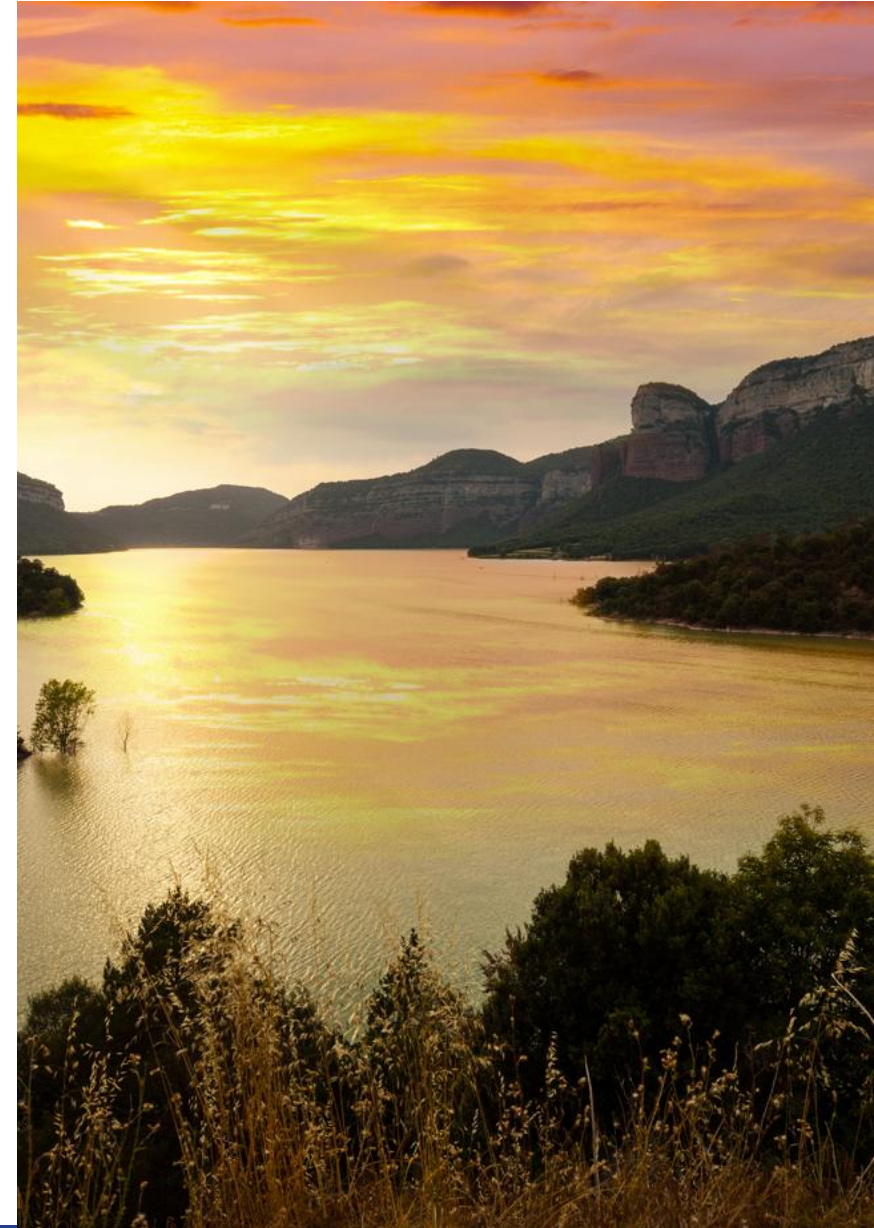
- New RFP Website: [Contracting Opportunities | Marin County](#)



# Behavioral Health Accountability Measures (BHAS)

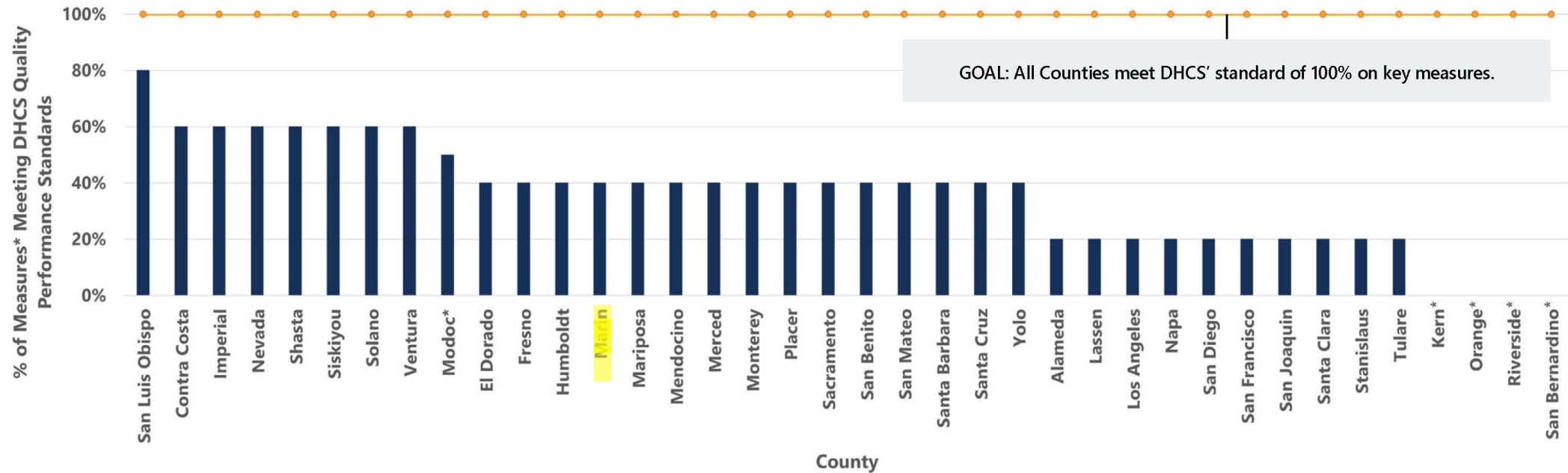
- DMC-ODS Plans are required to meet Minimum Performance Levels (MPL) for:
  - **FUA:** Follow-Up After ED Visit for Substance Use
  - **ODU:** Use of Pharmacotherapy for OUD
  - **POD:** Pharmacotherapy for OUD
  - **IET-I:** Initiation of SUD Treatment
  - **IET-E:** Engagement of SUD Treatment

## Report: DHCS Managed Care Quality Ratings



# Behavioral Health Accountability Measures (BHAS)

Figure 3: DMC-ODS Plans Meeting the DHCS Standard MPL for 5 Select DMC-ODS Measures\* in Measurement Year 2024



Note: The graph shows the percentage of behavioral health measures (total of five) for which county DMC-ODS plans met or exceeded the DHCS quality performance standards. These results were based on DHCS-calculated rates using Medi-Cal Connect and have not been validated by the External Quality Review Organization (EQRO).

\*If performance on any of the five measures are omitted due to very low numbers, the measure(s) are not included in the DMC-ODS county's overall performance calculation. Plans showing 0% in the chart above did not meet the MPL for any measure.

**8 of 38**  
**DMC-ODS Counties**

Met or exceeded the MPL on at least 50% of DMC-ODS measures.

**31 of 37**  
**DMC-ODS Counties**

Met or exceeded the MPL for the OUD measure (adults who have at least 180 days on continuous pharmacotherapy for opiate use disorder).

**18 of 37**  
**DMC-ODS Counties**

Met or exceeded the MPL on FUA-30 Days. This measure reflects coordination between the physical and behavioral health care systems.

# Discussion – Care Coordination

In groups of three (10 minutes):

- What improvements in care coordination are you/your staff seeing across our system?
- What can you do, in your role, to move coordination forward?
- Brief report out





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# RESOURCE SLIDES

*Please share with applicable staff*

# Reporting Reminders

## Update: Client Missing Data Report

### Reminder: SmartCare Report - SUD Clients Missing Data

- Please run this new report monthly
- It identifies required data missing for clients 14 days after enrollment in a program (from 9/1/25 on)
- Email only listed as missing if something else is also missing
- The previous timeliness report didn't show all situations where timeliness data was missing but this one does
- Instructions to resolve are at the bottom here under SUD clients missing data and Timeliness:

<https://www.marinbhhs.org/providers/substance-use-providers/electronic-health-record-resources>



# Immigration-Related Resources

- [Marin Immigrant Rights and Justice Workgroup](#)
- [Immigrant Legal Resource Center](#)
- [Red Card](#) (*Available in multiple languages*)
- Marin Rapid Response Network (Report ICE Activity): 415-991-4545
- You Tube Video: [Know Your Rights](#)



# County Updates and Announcements

- **Service Entry and Billing Submission**

- Ensure all services in SmartCare have been moved from Scheduled and Show status each month with submission of billing.
- All services should be in Complete, Cancel, No Show or Error **status**.
- Use the Services (My Office) List page and filter the All Service Statuses dropdown by Scheduled and Show to review outstanding services.
- Services with Warnings or Errors will remain in Show status until the errors are resolved.



Services (3551)

All Services	Scheduled	Include Do Not Complete	All Programs	Financial Assignment...	Apply Filter
All Locations	All Procedure Codes	All Clinicians	All Service Entry Staff	All Service Areas	
Service Id	Entered From	Entered To	DOS From 07/01/2023	DOS To 06/30/2024	
<input type="checkbox"/> Include Services created from Claims	<input type="checkbox"/> Only include Services with Add On Codes	<input type="checkbox"/> Only show Non-Billable Services	<input checked="" type="checkbox"/> Show Only Active Clients		

# County Updates and Announcements



## Payer Plan Entry and Maintenance

- All services must have an active payer plan on the date-of-service.
  - Non Medi-Cal services also require an additional payer plan that is appropriate for the service.
- All payer plans must have an ID number.
  - For Marin County, SB678, AB109, ADC, etc. add the client's account number.
- All payer plans should have a “Start Date” of the first of the month that services were rendered.

# County Updates and Announcements

- **Payer Plan Entry and Maintenance (cont.)**
  - Enter payer plans only once in the coverage screen
    - If the payer is already present in the “Client Plans” (top) box, use the “start/end dates” and “Service Area” fields to “Add” the payer to the “Plan Time Spans” (bottom) box.

Coverage (4) i

**Client Plans**    Notes

**Client Plans**

Plan Name	△	Insured Id	Co-Pay	Start Date	End Date	COB	Service Area	
<u>Marin County</u>				<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	DMC	<input type="button" value="Add"/>
<u>Medi-Cal DMC</u>				<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	DMC	<input type="button" value="Add"/>
<del><u>Medi-Cal DMC</u></del>				<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	DMC	<input type="button" value="Add"/>
<u>Medi-Cal MH</u>				<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	MH	<input type="button" value="Add"/>

# Resource Reminder: Medi-Cal Eligibility Re-determinations

## Who:

- Public Assistance (PA) Contact for SUD Providers: **Peter Funk** ([peter.funk@marincounty.gov](mailto:peter.funk@marincounty.gov))

## What:

To assist with continuous Medi-Cal coverage given return to regular Medi-Cal rules, this pilot was developed to provide a direct point of contact in PA for SUD Providers to inquire about Medi-Cal, including:

- Ascertaining eligibility status (active, denied, discontinued, pending)
- Troubleshooting Intercounty Transfer issues
- Troubleshooting Managed Care and access to care issues
- Receiving change reports for Medi-Cal eligibility, including but not limited to redetermination paperwork
- Navigating and remedying discontinuances and Medi-Cal restorations

## How:

- For PA and SUD to discuss, the client will need to **complete the *Authorization for Release of Protected Health Information to Third Parties (DHCS 6247)* and return it to the Peter.** It can be emailed, mailed, dropped off, faxed, or completed by phone by the client with Peter.
- *Note: Peter aims to respond within 48 hours and please encrypt emails.*

# SmartCare Electronic Health Record Updates and Tips

- How to Run Real Time Eligibility (270/271) Screen - 2023 CalMHSA

- Tip: If the client is not showing, you can either do an Inquiry or go back to the previous method used to check Medi-Cal eligibility.
- Reminder: Ensure you click “Update Coverage”
- Reminder: The End Date is the date of eligibility being searched for (e.g. first day of month)
- Reminder: Please verify that you are double checking the Plan Time Span start date. We are seeing more MCAL start dates of 2032 or 2024. Ideally, most clients should have their MCAL start date be 7/1/23.
  - If you notice an incorrect start date, changing the end date of eligibility to 7/1/23 will solve
- Reminder: If client’s insured ID is blank, use the SSN for that field to run eligibility

The screenshot displays the 'Coverage' section in a software interface. It features two main tabs: 'Client Plans' and 'Notes'. The 'Client Plans' tab is active, showing a table with columns for Plan Name, Insured Id, Co-Pay, Start Date, End Date, COB, and Service Area. The table lists four plans: Marin County, Medi-Cal DMC, Medi-Cal MH, and SABG. Below the table, there are filters for 'Show Current Plans Only' and 'Maximize Time Spans'. The 'Plan Time Spans' section shows a list of plans with checkboxes and 'Set End Date' buttons. A blue arrow points from the text in the first list item to the 'Set End Date' buttons in the screenshot.

Plan Name	Insured Id	Co-Pay	Start Date	End Date	COB	Service Area	
Marin County						DMC	Add
Medi-Cal DMC	[REDACTED]					DMC	Add
Medi-Cal MH	[REDACTED]					MH	Add
SABG						DMC	Add

Plan Time Spans

07/01/2023 - No End Date

Plan Name	Insured Id	Co-Pay	Start Date	End Date	COB	Service Area	
Medi-Cal DMC	[REDACTED]					DMC	Set End Date
SABG						DMC	Set End Date
Marin County						DMC	Set End Date

*\*The plan for SUD is Medi-Cal DMC. Please ensure that is at the bottom - the top will have both Medi-Cal DMC and Medi-Cal MH*

# SmartCare Electronic Health Record Updates and Tips

- For Marin County Payor Plans (Non-Medi-Cal): Please make sure the Plan is at the top and bottom (this will happen automatically for Medi-Cal when clicking “Update Coverage”)
  - *Note: The “Marin County” Plan should only be added to the DMC service area.*
- Reminder: Coverage plans are not specific to the program – they are specific to the client. As such, if they are Medi-Cal eligible, DMC should be listed as a payor, even if the service is not Medi-Cal eligible, as the client may access DMC-eligible services elsewhere.
- Tip: If the County of Responsibility is not Marin, though the eligibility shows County of Residence is Marin, then the Medi-Cal Plan will need to be added every month. Note: You can use the 270/271 for this.

# SmartCare Electronic Health Record Updates and Tips

- Reminder: **Interpreter Services** (All Providers)
  - If needed, click the box – **AND** – complete the Custom Fields
- The **CA ASAM** will now pull any responses from a CA ASAM completed for the same client in the last 180 days (EXCEPT for the LoC and Risk choices for each dimension)

The screenshot displays the SmartCare Electronic Health Record interface, specifically the 'Service Detail' tab. The interface is divided into several sections:

- Service Detail:** This section contains various input fields and checkboxes. It includes a 'Documentation Time' field with a 'Days' label, an 'Evidence Based Practices' dropdown menu, and a 'Transportation Service' dropdown menu currently set to 'No'. There are three checkboxes: 'Override Charge Amount', 'Override Errors', and 'Interpreter Services Needed'. To the right, there are two 'Overridden By' fields.
- Warnings / Errors:** This section features a table with columns for 'Date', 'Error Type', 'Error Message', and 'Next Step'. The table is currently empty, displaying 'No data to display'.
- Custom Fields:** This section is titled 'Interpreter Service' and contains two rows of information. The first row has 'Interpreter has been scheduled' with radio buttons for 'Yes' and 'No', and a 'Language' dropdown menu. The second row has 'Interpreter Agency Scheduled' with an empty text input field.

# Reminder: DMC Timely Access to Services


- Links to Instructions:
  - **For Non-OTP:** <https://2023.calmhsa.org/how-to-complete-the-dmc-outpatient-timeliness-record/>
  - **For OTP:** <https://2023.calmhsa.org/how-to-complete-the-dmc-opioid-timeliness-record/>
- This is required for State Reporting and important for assessing access to care and for continuous quality improvement
- There is a “flag” set-up in SmartCare to prompt staff to complete this form at enrollment
- **Implementation:**
  - For Outpatient and OTP LOCs: Use for all new admissions for January 1, 2024 forward (no change from guidance issued on 1/10/2024)
  - For Residential and Residential WM: Use for all new admissions for January 22, 2024 forward (updated guidance issued 1/18/2024)
  - You do not need to enter data retroactively from the above noted timeframes at this point

# SmartCare Updates & Tips

- **Health Questionnaire**
  - FYI: CalMHSA added a scanned document type for this document
- **SmartCare – Addresses**
  - If the beneficiary does not have an address, enter “20 North San Pedro Road, San Rafael, CA 94903”
  - No address will trigger a DMC denial (even if services shows as Completed)
- **New Users and Staff Updates** (e.g. role change, updated certification/ licensure dates, etc.)
  - Link to: [Staff User Access Form](#) (can be found at [www.marinbhhs.org/providers](http://www.marinbhhs.org/providers))

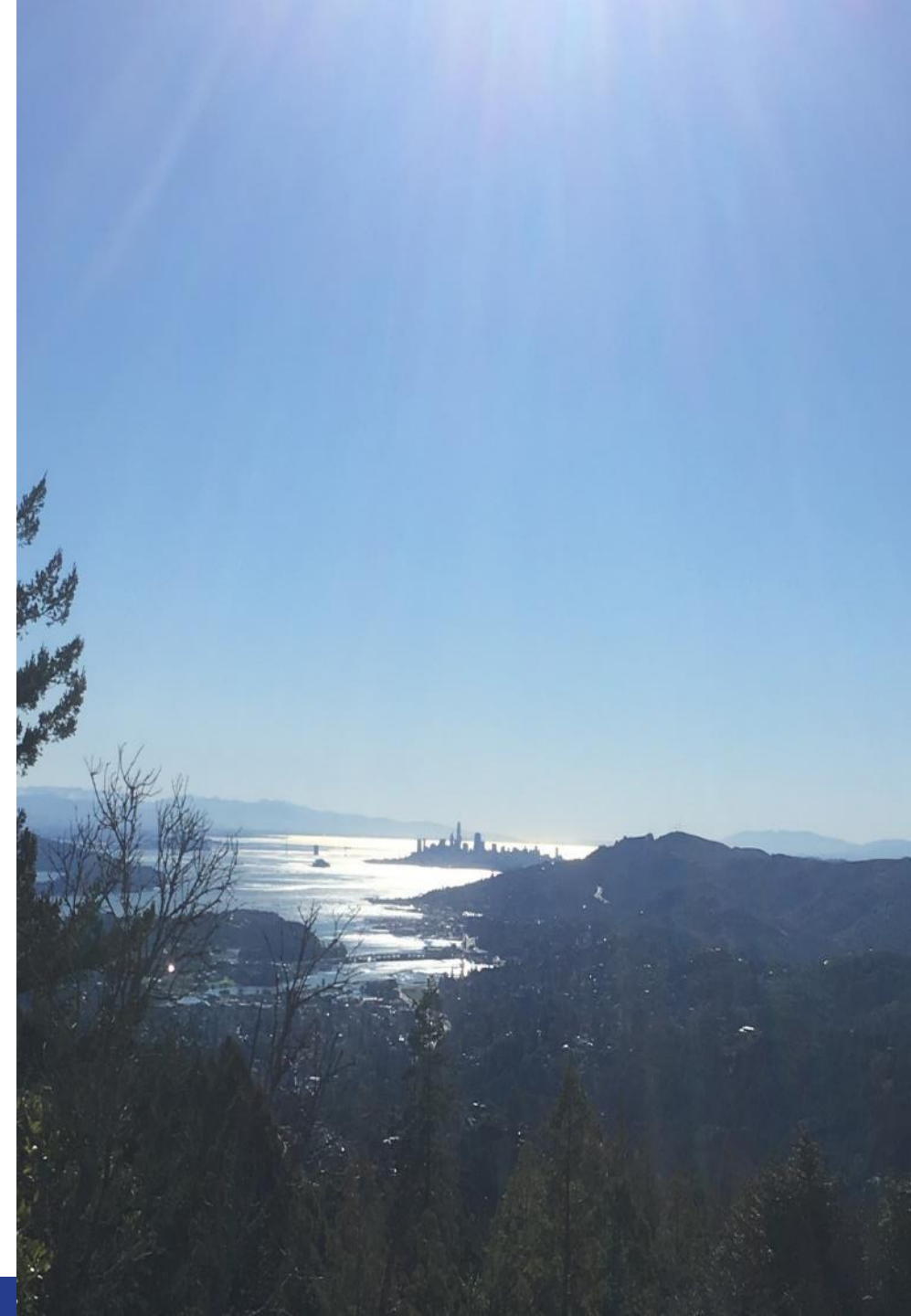
## SmartCare - Seeking Help

### CalMHSA Support:

- Navigating the EHR (Procedures & Workflows)
  - Use the “**Walk Me**” function by clicking the question mark icons  in the upper and lower right corners wherever you see it displayed.
  - Review Training Videos & Guides on the CalMHSA website: <https://2023.calmhsa.org/>

### For additional support

- [Live Chat is available and preferred - 2023 CalMHSA Site](#)
- [EHR@calmhsa.org](mailto:EHR@calmhsa.org) or by phone at (833) 686-6801
  - \* *This help is available from 7am – 7pm PST*
  - Additional help with procedures and workflows
  - Troubleshoot system related errors
  - Report system issues (glitches, bugs, etc.)



## SmartCare - Seeking Help

### Marin County BHRS EHR Support Team:

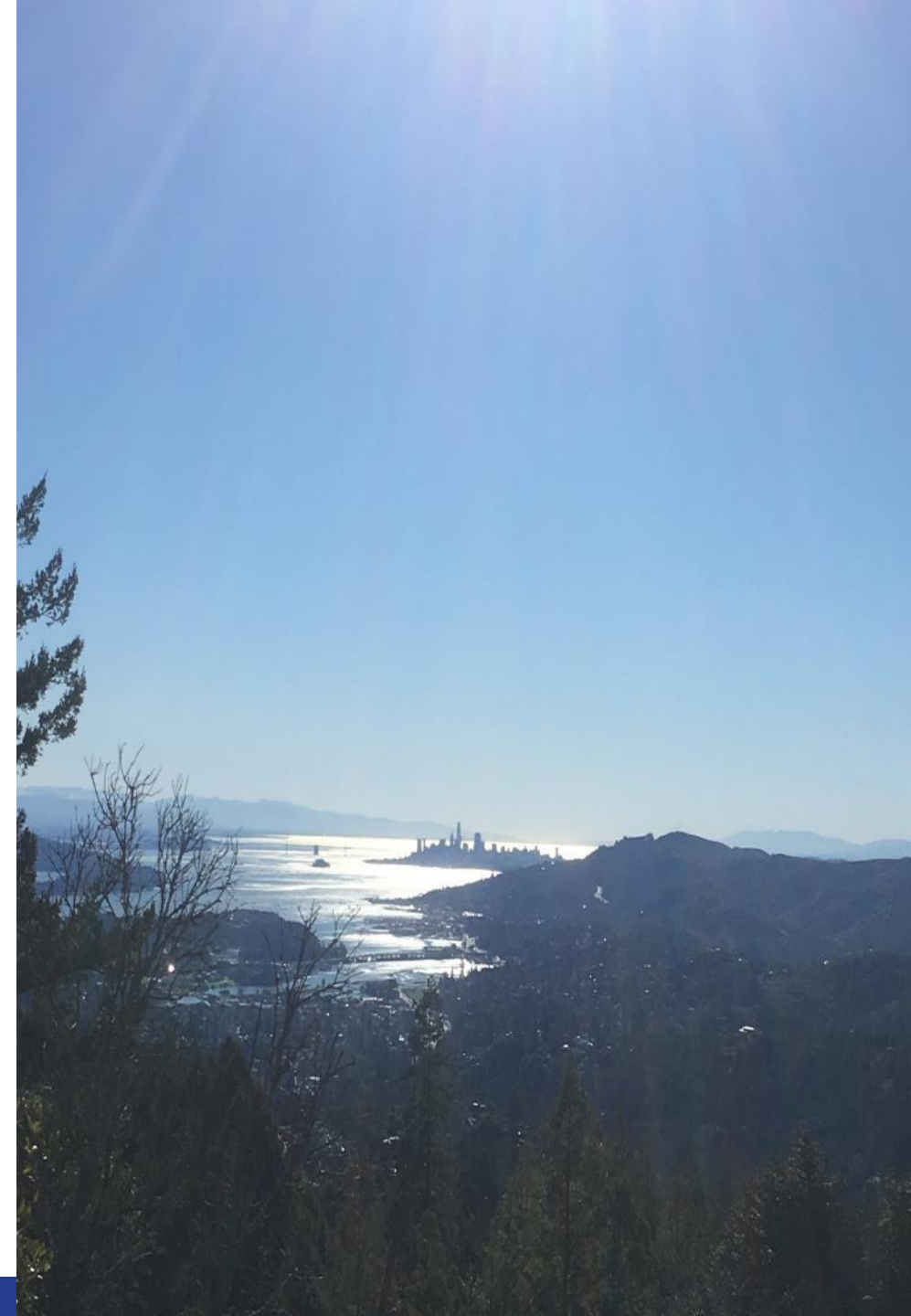
Use the [Marin BHRS EHR Support Request](#) /ticketing system to submit all new inquiries. The BHRS EHR support email should be used to respond to additional EHR requests to previously submitted tickets.

*Response time in/up to 3 days*

- Can't log in/locked out of account.
- There are missing programs, procedure codes or other options from drop downs.
- Can't add a problem to the problem list.
- Error messages that have to do with permissions.

### Submitting a Support Request:

- Please provide the specific screens that you were on and the buttons that you clicked that led to the error and the exact error message so the EHR team can troubleshoot.
- If the inquiry is client related, please provide the client account number, DOS or other service-related info to research and recreate the issue.
- Examples:
  - *Please add the following services/programs for the providers below: Provider First/Last, Comprehensive Community Support or add counseling to program A*
  - *Services have rate errors: Client ID #555xxxx for DOS 7/1/2023 has a rate error*



## SmartCare - Seeking Help

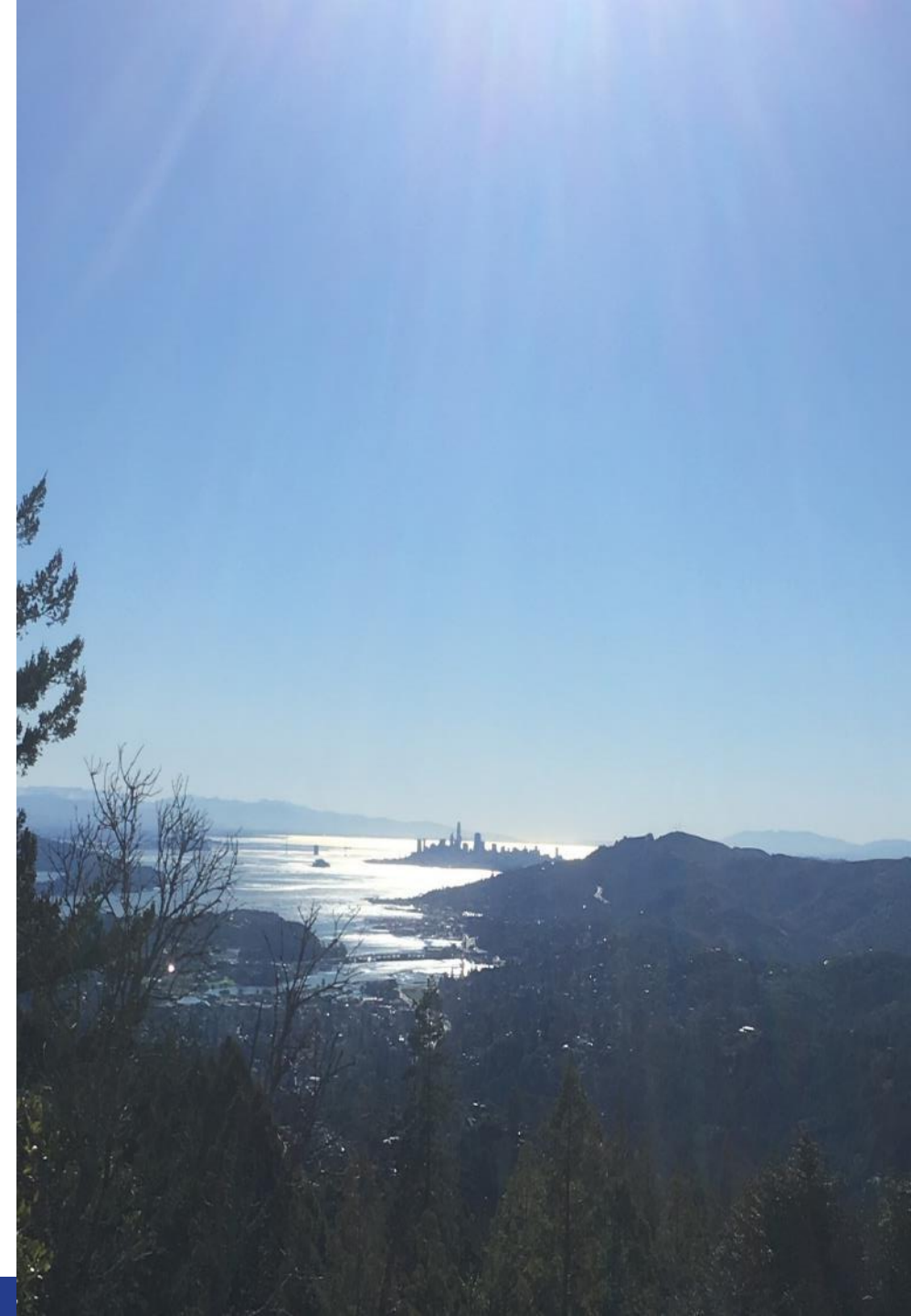
### Ongoing Clinical Support:

[BHRSQM@MarinCounty.org](mailto:BHRSQM@MarinCounty.org)

- BHRS Quality Management provides clinical support for services and required documents, etc.

### Contract Manager Support:

- Policy questions
  - CPT codes in contract
  - Which procedure codes to pick
- Billing questions
  - *Note: currently we do not have billing functionality and we anticipate possibly 3-6 months for submission. In the interim, we have plans for how to pay contractors and payment will not be delayed.*
- Barrier to time sensitive work (contact Contract Manager in addition to above resources)
- Notify them of reoccurring issues to keep them in the loop so they can provide support.





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